United Nations E/CN.9/2011/NGO/6

Economic and Social Council

Distr.: General
28 January 2011

Original: English

Commission on Population and Development
Forty-fourth session
11-15 April 2011
Item 5 of the provisional agenda*
General debate on the further implementation of the Programme of Action of the International Conference on Population and Development in the light of its twentieth anniversary

Statement submitted by Fundación para Estudio e Investigación de la Mujer, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.9/2011/1.

11-21808 (E) 250211

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Statement*

1. In light of the debate on the future of the Programme of Action of the International Conference on Population and Development, FEIM, as coordinator and representative of 43 international and regional HIV/AIDS and Sexual and Reproductive Health and Rights networks from Africa, Asia and Latin America and the Caribbean — "Strategies from the South: Building Synergies in HIV/AIDS and Sexual and Reproductive Health and Rights" — affirms that improving women's health or halting the HIV/AIDS epidemic cannot be achieved without guaranteeing the basic conditions that will allow women to exercise their fundamental human rights, including sexual and reproductive rights. Therefore, FEIM urges governments and donors to:

- **Reaffirm the importance of the implementation of the ICPD Programme of Action (POA)** through and beyond ICPD+20 in 2014, as an effective contribution to achieving Universal Access to prevention, treatment, care and support for women and girls and controlling the HIV/AIDS epidemic; and **impulse the active participation of civil society, especially of youth, women and WLWHA**, in the follow-up of the implementation of the Programme of Action and in the planning, implementation, and evaluation of policies, programs, and services for helping all people meet their health and educational needs. (POA 7.47 & 8.7, 1994; Key Actions 80, 1999)

- **Strengthen, expand and increase access to sexual and reproductive health services as a human right for all**, especially for women, lesbians, girls and adolescents and for those living with HIV/AIDS, including family planning programs and supplies, such as Emergency Contraception -EC- and male and female condoms (POA 7.16, 1994). Contraceptive prevalence rates are still low in many countries and must be increased to fill unmet needs for family planning, which remain high in all regions, and especially in sub-Saharan Africa where "one in every four women who is married or in union has an unmet need for family planning, a figure that has remained almost unchanged since 1995" (ECA, 2009: "Assessing Progress in Africa toward the MDGs").

- **Reduce Maternal Mortality Ratio (MMR) especially through access to routine and emergency obstetric care and safe abortion.** The slow progress on reducing maternal mortality and improving reproductive health, as recognized by the MDG Report of the Secretary-General of United Nations, are unacceptable. Improvement of health-care services needs to be accelerated to reduce the MMR especially in sub-Saharan Africa and Southern Asia, which show the highest MMR. Another principal contributor to maternal mortality in the developing world is unsafe abortion. In 2003, 20 million unsafe abortions took place worldwide — 98 per cent of them in developing countries — causing approximately 13 per cent of all maternal deaths worldwide (WHO, 2007: "Unsafe abortion. Global and regional estimates of the incidence of unsafe abortion and associated mortality in 2003").

- **Guarantee young people and adolescents (15-24 years old), especially young women and girls, access to confidential, gender-sensitive sexual and reproductive health services, including for HIV/AIDS**, and that legal and

* The present statement is being issued without formal editing.

social barriers to these services for youth and adolescents are removed (POA 7.45, 1994). Access to these services as well as contraceptive methods, including male condoms, is still not assured for adolescents in African, Asian and LAC countries. Yet, they are necessary for young people to make informed decisions about sexual and reproductive health, reduce their vulnerability to HIV and decrease adolescent birth rates.

- **Increase resources for strengthening health systems to guarantee Universal Access to HIV prevention, treatment, care and support,** especially scaling-up access to antiretroviral drugs for PLWHA. Women must be prioritized, since shortages in supply of and funding for ARV drugs often result in men receiving the drugs before women do. Women's access to ARV drugs is especially important in order to ensure the mother's life and well-being, and not only the child's survival. Ensure that services provide voluntary HIV counselling and testing (VCT), especially for women and their partners and, if positive, that they be treated for vertical HIV transmission in accordance with the MTCT-Plus Initiative, respecting the reproductive rights of women to decide for themselves if, when and with whom to have children (POA 8.34, 1994).

- **Guarantee comprehensive sexuality education (CSE) that addresses HIV transmission and prevention for all male and female adolescents and young people — attending and not attending schools — from a gender and human rights perspective,** to achieve the 95 per cent goal established in the 1999 ICPD+5 "Key Actions" and in the UNGASS Declaration of Commitment on HIV/AIDS adopted in June 2001 (POA 7.47, 1994; Key Actions 70, 1999). CSE is absent in most countries in Asia, Africa and LAC, even in many of those where it is mandated by law. This is reflected in the low number of young people (15-24 years of age) lacking comprehensive correct knowledge of HIV/AIDS worldwide, and especially in developing countries.

- **Eliminate all forms of discrimination and violence against women and girls in general and in the response to HIV/AIDS.** Violence against women is on the rise worldwide, and is a major violation of women's human rights and a primary impediment to women's empowerment. Around the world, physical and sexual gender-based violence is principally intimate partner or spousal violence. Gender inequalities and violence against women fuel HIV infections among women and girls, especially those in heterosexual relationships, and deny women their integrity and full exercise of their rights. The social and economic inequalities underlying violence against women must be addressed and women must be guaranteed the right to education, health, employment, and to buy, hold, and sell private property (POA 4.4 & 4.6, 1994).